

4/2/2015

W 31822

No. W 31822	Reinstatement Annual Report Form ADMIN DISSOLVED 10/11/2013		2. Registered Agent and Office (NOT A P.O. BOX) JOHN SHAPIRO 855 E. 13th Ave BOISE ID 83720 Charles A. Homer 1000 Riverwalk Drive #200 Idaho Falls, ID 83402																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. LEIGH CREEK LLC 1000 JOHNSON STREET MEMPHIS, TN 38103 P.O. Box S Aspen, CO 81612	3. New Registered Agent Signature. 																																				
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See instructions. <table border="1"> <thead> <tr> <th>Manager or Member</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager ☒ Member ☐</td> <td>William Kelly Foster,</td> <td>1151 Paulson Ct.,</td> <td>St. Helena,</td> <td>CA</td> <td></td> <td>94574</td> </tr> <tr> <td>Manager ☐ Member ☐</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager ☐ Member ☐</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager ☐ Member ☐</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager ☒ Member ☐	William Kelly Foster,	1151 Paulson Ct.,	St. Helena,	CA		94574	Manager ☐ Member ☐							Manager ☐ Member ☐							Manager ☐ Member ☐						
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5. Organized Under the Laws of: IDAHO W 31822	6. Signature:  Name (type or print): William Kelly Foster			Date: April 14, 2015 Title: Manager																																		

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM